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JANUARY 14, 2010 NEW JERSEY STATE BOARD OF MEDICAL EXAMINERS EFFECTIVE

FEBRUARY 10, 2010 NEW JERSEY STATE BOARD OF MEDICAL EXAMINERS

STATE OF NEW JERSEY DEPARTMENT OF LAW & PUBLIC SAFETY DIVISION OF CONSUMER AFFAIRS STATE BOARD OF MEDICAL EXAMINERS

IN THE MATTER OF SUSPENSION OR

Administrative Action

REVOCATION OF THE LICENSE OF

RANVIR AHLAWAT, M.D. LICENSE NO. 25MA07472700

ORDER OF REVOCATION

OF LICENSE TO PRACTICE MEDICINE AND SURGERY:

IN THE STATE OF NEW JERSEY

other appropriate relief.

This matter was opened to the New Jersey State Board of Medical Examiners ("the Board") upon receipt of information that respondent, Ranvir Ahlawat, M.D., was convicted on June 22, 2009, in United States District Court of the Eastern District of Pennsylvania, in four consolidated cases, of conspiracy to distribute controlled substances in violation of 21 <u>U.S.C.</u> §846, and money laundering in violation of 18 <u>U.S.C.</u> §1956. Respondent was sentenced to five (5) years probation, a \$1,500.00 fine, and forfeiture in the total amount of \$2,120,257.00. The Attorney General of New Jersey, Anne Milgram, by Kim Ringler, Deputy Attorney General, on November 5, 2009 filed a Verified Complaint

and supporting documents and exhibits, seeking revocation or

surgery in the State of New Jersey, civil penalties, costs, and

suspension of respondent's license to practice medicine and

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Respondent did not contest the allegations of the complaint, but submitted written arguments in mitigation, supported by documents relevant to his arguments. On December 9, 2009, respondent appeared before the Board <u>pro se</u> and was afforded the opportunity to give testimony and present evidence and argument on the issue of sanctions. Respondent testified, acknowledged that he did not contest the allegations in the Verified Complaint, elaborated upon the arguments made in his written submissions to the Board, and responded to questions by Board members.

### Allegations in the Verified Complaint

Respondent's criminal convictions, the focus of the Verified Complaint, were premised on respondent's having engaged in internet prescribing of controlled substances and other medications on a vast scale, for well over a year, based solely on his cursory review of questionnaires submitted by would-be patients, without performing any physical examination, diagnostic tests or any follow-up, in what was virtually an assembly line operation to authorize prescriptions.

Count I of the Verified Complaint filed in this matter alleged the convictions on conspiracy and money laundering, and the underlying conduct as stipulated to in respondent's plea agreement. The Complaint specifically alleged violations of

 $\underline{\text{N.J.S.A.}}$  45:1-21(b), (f), and (e), and violation of  $\underline{\text{N.J.S.A.}}$  45:9-6, as grounds for disciplinary action.

count II of the Complaint alleged that the conduct underlying respondent's criminal convictions, i.e., furnishing prescriptions without performing appropriate examination, obtaining an adequate medical history, formulating an appropriate diagnosis, or developing a treatment plan, and respondent's failure to keep accurate and complete records when prescribing controlled substances, constitute violations of N.J.A.C. 13:35-7.1A and N.J.A.C. 13:35-7.6(a) (improper prescribing) as well as N.J.A.C 13:37-7.6(g) (inadequate recordkeeping), subjecting respondent to sanctions pursuant to N.J.S.A. 45:1-21(h).

Count III of the Complaint alleged respondent's arrest on May 29, 2007 for shoplifting software from a CostCo store, and further alleged that subsequent to the arrest, respondent sent two greeting cards to the store's loss prevention manager enclosing checks for \$500.00 and \$1,000.00 respectively, with notations that appeared intended to influence the manager to drop the charges against respondent. Respondent ultimately pled guilty to littering in resolution of this matter. Both in his written submissions and in his testimony at the December 9, 2009 mitigation hearing, respondent maintained that he had never actually been arrested. However, he did not contest that the conduct occurred or that charges were brought against him.

The Federal convictions were based on conduct that occurred between December of 2002 and May 19, 2004. In the stipulations of his plea agreement, respondent admitted to entering into agreements with individuals at four entities -- RX Medical One in California; Medical Web Services of Miami, Florida; American Web Services of Gretna, Louisiana; and Hope Mills and E.V.A. Global. Pursuant to agreements with these entities, respondent reviewed prescription requests by persons who placed orders over the internet through these entities. Respondent determined whether to approve the prescriptions solely by reviewing questionnaires filled out by these consumers on the internet, without any physical examination of the consumers or contact with their previous physicians. From February of 2003 through May 19, 2004, respondent approved a total of approximately 184,450 prescriptions, including 114,684 prescriptions for controlled substances, pursuant to his agreement with RX Medical One and was paid a total of \$1,319,524. During the same time period, respondent approved a total of approximately 54,991 prescriptions, including 32,702 prescriptions for controlled substances, pursuant to his agreement with Medical Web Services, for which he was paid a total of \$352,814. He also approved 30,653 prescriptions for controlled substances pursuant to his agreement with American Medical Services between 2002 to 2004, for which he was paid a total of \$220,785; and 14,895

prescriptions, including 8,578 prescriptions for controlled substances, pursuant to his agreement with Hope Mills and E.V.A. Global in 2003 and 2004, for which he was paid a total of \$89,370.

In 2003 and 2004, seeking to maximize his earnings,
Respondent himself operated an internet website called RX Stop.
Thus, Respondent not only prescribed controlled substances, but
he hired other physicians to prescribe for consumers as well.
Individually, he approved approximately 384 prescriptions through
RX Stop, which were filled by Gem Pharmacy or Universal Pharmacy
Solutions, both of which were located in the Eastern District of
Pennsylvania. On November 18, 2003 and December 18, 2003 he made
payments of \$19,332.74 and \$\$5,487.24, respectively, to Gem
Pharmacy, and on February 9, 2004 he paid \$44,340.61 to Universal
Pharmacy Solutions, which sums were proceeds from respondent's
illegal conduct, and were intended to induce these entities to
promote and further the operation of RX Stop. This conduct was
the basis for the money laundering conviction.

The stipulation included authorization of additional prescriptions of Schedule III and Schedule IV controlled substances for the entities Impact Health and Integra RX, for sentencing purposes only.

According to the Federal Indictment, both Gem Pharmacy and Universal Pharmacy Solutions operated solely to fill prescriptions obtained over the internet, and did not fill prescriptions for "walk-in" customers.

## Respondent's Arguments in Mitigation

Respondent submitted written arguments in mitigation of his conduct dated October 2, 2009 and October 11, 2009, the latter filed with the Board on November 18, 2009 and styled "Answer to Complaint." In these submissions, and subsequently in testimony before the Board on December 9, 2009, respondent's principal argument was that at the time that he completed his medical residency program in June of 2002, and was approached by medical recruiters about entering into arrangements with online medical consultation companies, the pertinent Federal and State law and regulations were unsettled with regard to internet prescribing. Respondent submitted a copy of a letter dated September 15, 2002, which he claimed to have written to the Board asking for guidance with respect to prescribing medications over the internet. also submitted a copy of a similar inquiry, dated December 16, 2002, purportedly sent to the Division of Consumer Affairs (DCA). Respondent maintained that at this time, when he began the conduct which led to his criminal convictions, he was just entering into private practice, and therefore the ambiguity of the relevant law and the lack of guidance from the Board and DCA should be taken into consideration in the Board's decision as to sanctions. He also stated that his judgment was somewhat impaired in 2002 due to psychological problems<sup>3</sup> that ensued following the death of his father, a traumatic event in his life.

Respondent also pointed out that the patients for whom he prescribed submitted certifications indicating that they had initially been evaluated, examined and diagnosed during an office visit, by their regular physician, but that they had lost health insurance coverage and were using the online prescription service as a "stop gap" measure. Respondent stated that electronic medical records were maintained by the internet companies for whom he reviewed the prescription requests, and were accessible at all times. Respondent stressed that he declined to provide what he termed online "consultation services" for pain management, for mental health conditions, for diabetes or infections, but confined himself to authorizing prescriptions for medications related to "life style," such as medications for obesity, erectile dysfunction, insomnia, arthritis and muscle spasms.

Respondent further offered as mitigating the fact that the Drug Enforcement Administration(DEA), to whom he had voluntarily surrendered his DEA registration number on June 8, 2005, issued him a restricted Federal Controlled Substance Registration

In his testimony, respondent described his condition as obsessive compulsive disorder; however, the written submissions include a mental health evaluation which characterizes him as suffering from depression, leading to an obsession with the online medical "consultations," manifested by respondent at times working 16 to 20 hours per day, seven days a week.

pursuant to a Memorandum of Agreement he signed on August 14, 2009; as well as the fact that the New Jersey Division of Consumer Affairs, although made aware of his situation in 2005, took no action as to his retention and renewal of his controlled substance certificate in New Jersey.

Respondent pointed out the fact that he was supporting a four year old son with medical problems, a 56 year old disabled brother and an 80 year old mother, and asked the Board not to impose a "career death penalty." He further maintained that he has been in treatment and continues in treatment with a psychologist and psychiatrist, which will assist him in improving his decisionmaking. Additionally, respondent reminded the Board that he had included approximately 26 letters of support from patients and colleagues in his submissions.

With respect to the shoplifting arrest, respondent noted that this occurred at a time when he was under significant pressure stemming from financial difficulties caused by the criminal case. He no longer had an attorney to represent him because he could no longer afford one. He was also under stress with regard to the pending sentencing in the criminal case, his son had major health problems, and he had recently received notice from the Internal Revenue Service that he owed over \$100,000 in taxes and penalties. Respondent claimed that this caused him to undergo a nervous breakdown, and also prompted his

ill-advised taking of the software from CostCo to work on his 2004, 2005 and 2006 taxes.

### The State's Argument

Deputy Attorney General Kim Ringler presented the case for the prosecution, and sought revocation of respondent's license. She pointed out that respondent's conduct, in prescribing medication to strangers over the internet, without meeting or treating the patients, or offering a treatment plan, constitutes a violation of standards that go to the heart of the practice of medicine. DAG Ringler argued that in engaging in this conduct, respondent was cognizant of the risk to his license; he took a chance, was unjustly enriched, and paid a big price in terms of his criminal conviction. Based upon the Federal felony conviction and the conduct, DAG Ringler argued that revocation was the appropriate sanction in this matter.

### The Board's Decision

The Board has considered the record, including respondent's testimony and submissions in mitigation and the Attorney General's arguments, and finds that revocation is indeed the appropriate sanction. Respondent argues that N.J.A.C. 13:35-7.4A, addressing electronically transmitted prescriptions, became effective on September 15, 2003, and that Federal authorities did not offer guidelines on the subject until much later. The Board notes that N.J.A.C. 13:35-7.4A was proposed and published in the

New Jersey Register in September of 2002, prior to the beginning of respondent's criminal conduct. Nonetheless, Respondent's principal argument is focused on the unsettled or ambiguous nature of the regulations regarding internet prescribing. This argument is unavailing and serves to illustrate Dr. Ahalwat's willful blindness, his inability to comprehend that by approving a massive number of prescriptions with minimal information as to the patient's condition, and no patient contact, he engaged in egregious professional misconduct. No regulation is necessary to inform a physician that such prescribing is improper. The conduct is so clearly violative of appropriate standards of care that it is immaterial as to whether the internet is involved, or the status of pending regulations.

N.J.A.C. 13:35-7.2, setting forth the requirements for issuing written prescriptions for medicines, which requires examination or evaluation of the patient's condition, as well as appropriate follow-up, was effective in 1997, and amended on October 2, 2000, well before respondent completed his residency. However, the existence or date of promulgation of that or any regulation, or any guidance by the DEA, is peripheral to the primary issue, which is respondent's basic responsibilities as a physician. That respondent claims he did not perceive that his conduct was wrongful until federal authorities knocked at his door illustrates his defective judgment over a sustained period.

This defective judgment persisted, manifesting itself yet again in the shoplifting incident, and respondent's subsequent desperate attempt to buy his way out of the results of his conduct. These actions anticipate his current attempt to argue technical deficiencies to avoid the consequences of his glaring abrogation of his professional responsibilities. The Board finds that respondent's conduct in authorizing many thousands of prescriptions without any patient contact and certainly without any meaningful doctor-patient relationship, constitutes clear professional misconduct, as any physician who had completed his or her medical training should realize.

The Board finds as an extenuating factor, however, that respondent had just begun his medical career when he entered into the arrangements to provide online medical consultations. The Board is not unsympathetic to respondent's personal circumstances, and he has also presented a number of letters from patients and colleagues in praise of his compassion and skill. However, these factors pale in the face of the need for an appropriate punishment reflecting principles of both specific and general deterrence, considering the sheer magnitude of respondent's misconduct. Respondent's criminal convictions on charges relating directly and adversely to the practice of medicine, based on his authorizing upwards of two million dosage units of Schedule III controlled substances, and twelve million

dosage units of Schedule IV controlled substances, without any legitimate basis or adequate information, warrants the ultimate sanction of revocation. In light of the severe burden already imposed upon respondent by the criminal sanctions imposed, however, the Board declines to impose any monetary penalties and notes that the Attorney General does not intend to submit a cost application in this matter.

The Board finds that inasmuch as the allegations in Counts I and II of the Verified Complaint are uncontested, respondent is subject to sanctions pursuant to N.J.S.A. 45:1-21(b), commission of acts of dishonesty, fraud, deception, misrepresentation, false promise or false pretense; N.J.S.A. 45:1-21(f), for commission of a crime or offense which both involves moral turpitude and relates adversely to the practice of medicine; N.J.S.A. 45:1-21(e), professional misconduct; and N.J.S.A. 45:1-21(h), violation of a statute or regulation administered by the Board. With respect to the allegations in Count III, respondent is also subject to sanctions pursuant to N.J.S.A. 45:1-21(b).

Accordingly,

IT IS, ON THIS 14TH DAY OF JANUARY , 2010, HEREBY ORDERED:

1. Respondent's license to engage in the practice of medicine and surgery in the State of New Jersey is hereby

revoked. No application for reinstatement of license will be considered for a minimum period of three years.

- 2. The revocation of license shall become effective within thirty (30) days from the date of respondent's December 9, 2009 appearance before the Board, that is, on January 8, 2010, in order to afford respondent's patients sufficient opportunity for transfer of their care. Respondent shall take no new patients after the oral announcement of this order on the record on December 9, 2009, and shall make appropriate arrangements for the medical records in his possession so that there can be continuous patient care for his present patients.
- 3. No later than 30 days from the oral announcement of this order on the record on December 9, 2009, respondent shall forward his license and biennial renewal card to: William V. Roeder, Executive Director, Board of Medical Examiners, P.O. Box 183, Trenton, NJ 08625-0183.
- 4. At such time as respondent may seek reinstatement of his license, he shall appear before a Committee of the Board to demonstrate his fitness to resume practice, demonstrating at a minimum successful completion of Board-approved courses in medical ethics, in the prescribing of controlled substances, and regarding medical record keeping. Respondent shall also document continuing compliance with the criminal sanctions imposed.

5. Should reinstatement be granted, the Board reserves the right to condition or limit respondent's license, as in its sole discretion seems appropriate to the circumstances of this matter, and in order to protect the public health, safety and welfare.

Ву:

NEW JEKSEY STATE HOARD OF MEDICAL EXAMINERS:

Paul C. Mendelowitz, M.D.

Board President

14

### Exhibit List

### State's Exhibits:

- AG1- Federal Indictment, U.S. v. Bezonsky, et. al., 06-CR-00637, E.D. PA., filed August 2, 2006
- AG2- Federal Information, U.S. v. Ahlawat, 06-258, E.D. LA., filed September 8, 2006
- AG3- Federal Information, U.S. v. Ahlawat, 06-1049, N.D. IA., filed October 4, 2006
- AG4- Transcript of Change of Plea Hearing, U.S. v. Ahlawat, 06-00637, E.D. PA., February 20, 2007
- AG5- Cover Letter from Assistant U.S. Attorney Albert Glenn to New Jersey State Board of Medical Examiners, dated July 16, 2009; Judgments of Conviction
- AG6- Transcript of Sentencing Hearing, U.S. v. Ahlawat, 06-394-3, 06-564-1, 06-576-1, 06-637-1, E.D. PA., June 19, 2009
- AG7- North Carolina Medical Board Consent Order, dated March 2, 2006
- AG8- California Medical Board Citation Order, dated July 30, 2004
- AG8- Brick Township Police Reports, dated May 4, 2007, May 22, 2007, May 29, 2007, May 31, 2007, and June 4, 2007

# Respondent's Exhibits:

- Exhibit A-Letter dated September 15, 2002 from Dr. Ahlawat to New Jersey State Board of Medical Examiners
- Exhibit B- Letter dated December 16, 2002 from Dr. Ahlawat to New Jersey Department of Law and Public Safety, Division of Consumer Affairs
- Exhibit C- New Jersey Register, Volume 35, Number 18, Rule
  Adoption by New Jersey State Board of Medical Examiners
  dated Monday, September 15, 2003, "Examination of Patient's
  Condition Required Prior to Dispensing Drugs or Issuing a
  Prescription; Exceptions; Facsimile Transmitted
  Prescriptions; Electronically Transmitted Prescriptions"
  N.J.A.C. 13:35-7.1A, 13:35-7.4, and 13:35-7.4A
- Exhibit D- United States Department of Justice Practitioner's Manual "An Informational Outline of the Controlled Substances Act", 2006 Edition

- Exhibit E- Federal Register Volume 74, No. 64, Monday April 6, 2009; 21 CFR Parts 1300, 1301, 1304, 1306 "Implementation of the Ryan Haight Online Pharmacy Consumer Protection Act of 2008"
- Exhibit F(1) Controlled Substance Registration Certificate for Dr. Ahlawat issued September 9, 2009
- Exhibit F(2) Memorandum of Agreement between Dr. Ahlawat and United States Department of Justice, Drug Enforcement Administration, dated August 11, 2009
- Exhibit G- Letter dated July 12, 2005 from Dr. Ahlawat to Lucius Bowser, Special Investigator, Drug Control Unit, Enforcement Bureau, Division of Consumer Affairs
- Exhibit H- Mental Health Evaluation of Dr. Ahlawat by Dr. Winston Collins, Director, Precision Consultants of Philadelphia
- Exhibit I- Letter dated June 8, 2009 from Dr. Peter Litwin,
  Psychiatric Solutions, to Senior Judge Robert Kelly, U.S.
  District Court, Eastern District of Pennsylvania
- Exhibit J- Twenty five (25) patient letters of reference on behalf of Dr. Ahlawat

# DIRECTIVES APPLICABLE TO ANY MEDICAL BOARD LICENSEE WHO IS DISCIPLINED OR WHOSE SURRENDER OF LICENSURE HAS BEEN ACCEPTED

### APPROVED BY THE BOARD ON MAY 10, 2000

All licensees who are the subject of a disciplinary order of the Board are required to provide the information required on the addendum to these directives. The information provided will be maintained separately and will not be part of the public document filed with the Board. Failure to provide the information required may result in further disciplinary action for failing to cooperate with the Board, as required by N.J.A.C. 13:45C-1 et seq. Paragraphs 1 through 4 below shall apply when a license is suspended or revoked or permanently surrendered, with or without prejudice. Paragraph 5 applies to licensees who are the subject of an order which, while permitting continued practice, contains a probation or monitoring requirement.

### 1. Document Return and Agency Notification

The licensee shall promptly forward to the Board office at Post Office Box 183, 140 East Front Street, 2nd floor, Trenton, New Jersey 08625-0183, the original license, current biennial registration and, if applicable, the original CDS registration. In addition, if the licensee holds a Drug Enforcement Agency (DEA) registration, he or she shall promptly advise the DEA of the licensure action. (With respect to suspensions of a finite term, at the conclusion of the term, the licensee may contact the Board office for the return of the documents previously surrendered to the Board. In addition, at the conclusion of the term, the licensee should contact the DEA to advise of the resumption of practice and to ascertain the impact of that change upon his/her DEA registration.)

### 2. Practice Cessation

The licensee shall cease and desist from engaging in the practice of medicine in this State. This prohibition not only bars a licensee from rendering professional services, but also from providing an opinion as to professional practice or its application, or representing him/herself as being eligible to practice. (Although the licensee need not affirmatively advise patients or others of the revocation, suspension or surrender, the licensee must truthfully disclose his/her licensure status in response to inquiry.) The disciplined licensee is also prohibited from occupying, sharing or using office space in which another licensee provides health care services. The disciplined licensee may contract for, accept payment from another licensee for or rent at fair market value office premises and/or equipment. In no case may the disciplined licensee authorize, allow or condone the use of his/her provider number by any health care practice or any other licensee or health care provider. (In situations where the licensee has been suspended for less than one year, the licensee may accept payment from another professional who is using his/her office during the period that the licensee is suspended, for the payment of salaries for office staff employed at the time of the Board action.)

A licensee whose license has been revoked, suspended for one (1) year or more or permanently surrendered must remove signs and take affirmative action to stop advertisements by which his/her eligibility to practice is represented. The licensee must also take steps to remove his/her name from professional listings, telephone directories, professional stationery, or billings. If the licensee's name is utilized in a group practice title, it shall be deleted. Prescription pads bearing the licensee's name shall be destroyed. A destruction report form obtained from the Office of Drug Control (973-504-6558) must be filed. If no other licensee is providing services at the location, all medications must be removed and returned to the manufacturer, if possible, destroyed or safeguarded. (In situations where a license has been suspended for less than one year, prescription pads and medications need not be destroyed but must be secured in a locked place for safekeeping.)

# 3. Practice Income Prohibitions/Divestiture of Equity Interest in Professional Service Corporations and Limited Liability Companies

A licensee shall not charge, receive or share in any fee for professional services rendered by him/herself or others while barred from engaging in the professional practice. The licensee may be compensated for the reasonable value of services lawfully rendered and disbursements incurred on a patient's behalf prior to the effective date of the Board action.

A licensee who is a shareholder in a professional service corporation organized to engage in the professional practice, whose license is revoked, surrendered or suspended for a term of one (1) year or more shall be deemed to be disqualified from the practice within the meaning of the Professional Service Corporation Act. (N.J.S.A. 14A:17-11). A disqualified licensee shall divest him/herself of all financial interest in the professional service corporation pursuant to N.J.S.A. 14A:17-13(c). A licensee who is a member of a limited liability company organized pursuant to N.J.S.A. 42:1-44, shall divest him/herself of all financial interest. Such divestiture shall occur within 90 days following the the entry of the Order rendering the licensee disqualified to participate in the applicable form of ownership. Upon divestiture, a licensee shall forward to the Board a copy of documentation forwarded to the Secretary of State, Commercial Reporting Division, demonstrating that the interest has been terminated. If the licensee is the sole shareholder in a professional service corporation, the corporation must be dissolved within 90 days of the licensee's disqualification.

### 4. Medical Records

If, as a result of the Board's action, a practice is closed or transferred to another location, the licensee shall ensure that during the three (3) month period following the effective date of the disciplinary order, a message will be delivered to patients calling the former office premises, advising where records may be obtained. The message should inform patients of the names and telephone numbers of the licensee (or his/her attorney) assuming custody of the records. The same information shall also be disseminated by means of a notice to be published at least once per month for three (3) months in a newspaper of

general circulation in the geographic vicinity in which the practice was conducted. At the end of the three month period, the licensee shall file with the Board the name and telephone number of the contact person who will have access to medical records of former patients. Any change in that individual or his/her telephone number shall be promptly reported to the Board. When a patient or his/her representative requests a copy of his/her medical record or asks that record be forwarded to another health care provider, the licensee shall promptly provide the record without charge to the patient.

## 5. Probation/Monitoring Conditions

With respect to any licensee who is the subject of any Order imposing a probation or monitoring requirement or a stay of an active suspension, in whole or in part, which is conditioned upon compliance with a probation or monitoring requirement, the licensee shall fully cooperate with the Board and its designated representatives, including the Enforcement Bureau of the Division of Consumer Affairs, in ongoing monitoring of the licensee's status and practice. Such monitoring shall be at the expense of the disciplined practitioner.

- (a) Monitoring of practice conditions may include, but is not limited to, inspection of the professional premises and equipment, and Inspection and copying of patient records (confidentiality of patient identity shall be protected by the Board) to verify compliance with the Board Order and accepted standards of practice.
- (b) Monitoring of status conditions for an impaired practitioner may include, but is not limited to, practitioner cooperation in providing releases permitting unrestricted access to records and other information to the extent permitted by law from any treatment facility, other treating practitioner, support group or other individual/facility involved in the education, treatment, monitoring or oversight of the practitioner, or maintained by a rehabilitation program for impaired practitioners. If bodily substance monitoring has been ordered, the practitioner shall fully cooperate by responding to a demand for breath, blood, urine or other sample in a timely manner and providing the designated sample.

# NOTICE OF REPORTING PRACTICES OF BOARD REGARDING DISCIPLINARY ACTIONS

Pursuant to N.J.S.A. 52:14B-3(3), all orders of the New Jersey State Board of Medical Examiners are available for public inspection. Should any inquiry be made concerning the status of a licensee, the inquirer will be informed of the existence of the order and a copy will be provided if requested. All evidentiary hearings, proceedings on motions or other applications which are conducted as public hearings and the record, including the transcript and documents marked in evidence, are available for public inspection, upon request.

Pursuant to 45 CFR Subtitle A 60.8, the Board is obligated to report to the National Practitioners Data Bank any action relating to a physician which is based on reasons relating to professional competence or professional conduct:

- Which revokes or suspends (or otherwise restricts) a license,
- (2) Which censures, reprimands or places on probation,
- (3) Under which a license is surrendered.

Pursuant to 45 CFR Section 61.7, the Board is obligated to report to the Healthcare Integrity and Protection (HIP) Data Bank, any formal or official actions, such as revocation or suspension of a license (and the length of any such suspension), reprimand, censure or probation or any other loss of license or the right to apply for, or renew, a license of the provider, supplier, or practitioner, whether by operation of law, voluntary surrender, non-renewability, or otherwise, or any other negative action or finding by such Federal or State agency that is publicly available information.

Pursuant to N.J.S.A.45:9-19.13, if the Board refuses to issue, suspends, revokes or otherwise places conditions on a license or permit, it is obligated to notify each licensed health care facility and health maintenance organization with which a licensee is affiliated and every other board licensee in this state with whom he or she is directly associated in private medical practice.

In accordance with an agreement with the Federation of State Medical Boards of the United States, a list of all disciplinary orders are provided to that organization on a monthly basis.

Within the month following entry of an order, a summary of the order will appear on the public agenda for the next monthly Board meeting and is forwarded to those members of the public requesting a copy. In addition, the same summary will appear in the minutes of that Board meeting, which are also made available to those requesting a copy.

Within the month following entry of an order, a summary of the order will appear in a Monthly Disciplinary Action Listing which is made available to those members of the public requesting a copy.

On a periodic basis the Board disseminates to its licensees a newsletter which includes a brief description of all of the orders entered by the Board.

From time to time, the Press Office of the Division of Consumer Affairs may issue releases including the summaries of the content of public orders.

Nothing herein is intended in any way to limit the Board, the Division or the Attorney General from disclosing any public document.